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CONFIRMATION NO. 6387

<b>SERIAL NUMBER</b> 10/561,423	<b>FILING OR 371(c) DATE</b> 12/19/2005 <b>RULE</b>	<b>CLASS</b> 433	<b>GROUP ART UNIT</b> 3732	<b>ATTORNEY DOCKET NO.</b> 62542-1030
<b>APPLICANTS</b> Luis Carriere Lluch, Barcelona, SPAIN;				
<b>** CONTINUING DATA *****</b> This application is a 371 of PCT/ES03/00631 12/15/2003				
<b>** FOREIGN APPLICATIONS *****</b> SPAIN 200301758 07/25/2003				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **</b> ** 08/09/2006				
Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Acknowledged <i>[Signature]</i> <i>SKS</i> Examiner's Signature Initials		<b>STATE OR COUNTRY</b> SPAIN	<b>SHEETS DRAWING</b> 2	<b>TOTAL CLAIMS</b> 3
			<b>INDEPENDENT CLAIMS</b> 1	
<b>ADDRESS</b> Michael A O'Neil Michael A O'Neil PC 5949 Sherry Lane Suite 820 Dallas, TX 75225				
<b>TITLE</b> Improvements to an auxiliary element for the segmental distalization to the canine-to-molar posterior maxillary area in orthodontic treatments				
<b>FILING FEE RECEIVED</b> 450	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	